

Appl. No. 10/002,882  
Amdt. Dated November 1, 2005  
Request for RCE

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APP 1316

NOV 01 2005

Appln. No. : 10/002,882 Confirmation No. 4832  
Applicants : Chit Chung et al  
Filed : November 2, 2001  
Title : Providing Secure, Instantaneous, Directory- Integrated,  
Multiparty Communications Services  
Art Unit : 2155  
Examiner : Faruk Hamza  
Docket No. : APP1316 US  
Customer No. : 09941

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 23313-1405

**AMENDMENT**

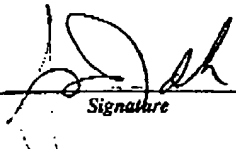
Sir:

In response to the Final Rejection of August 5, 2005, in the above identified application, please amend said application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.



<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>APP 1316</b>	
Applicant(s): <b>Chit Chung et al</b>					
Application No. <b>10/002,882</b>	Filing Date <b>11/02/2001</b>	Examiner <b>HAMZA, Faruk</b>	Customer No. <b>09941</b>	Group Art Unit <b>2155</b>	Confirmation No. <b>4832</b>
Invention: <b>Providing Secure, Instantaneous, Directory-Integrated, Multiparty, Communications Services</b>					
<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>NOV 01 2005</b>					
<b>COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	7 -	22 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	1 -	8 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account					
<input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038.					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 Signature					
Dated: November 1, 2005					
<b>James W. Falk (Reg. No. 16154)</b> <b>Telcordia Technologies, Inc.</b> <b>One Telcordia Drive 5G116</b> <b>Piscataway, NJ 08854-4157</b> <b>Telephone (732) 699-4465</b>					
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px; text-align: center;">(Date)</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px; text-align: center;">Signature of Person Mailing Correspondence</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px; text-align: center;">Typed or Printed Name of Person Mailing Correspondence</div>					
cc:					